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Line of Inquiry and source		Expectations
1.0	Health and Safety Program	
1.1	The employer has developed and issued a written health and safety plan which is available to the employees	29 CFR 1910.119 and 120 require employers to have a written health and safety plan which alerts employees to the hazardous substances or waste to which they could be exposed. Employees must receive adequate training on the hazards up to and including the 24 hour OSHA training for hazardous waste workers. Refresher training must be every 3 years except for hazardous waste workers who must be recertified with 8 hours of training each year. The auditor should review the plan and training records to insure compliance with the appropriate standard.
2.0	Medical and Exposure Records	

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<p>2.1 The employer has ensured the adequate preservation and retention of employee medical records and records of exposure of toxic substances [29 CFR 1910.20(d)]</p>	<p>29 CFR 1910.20(d)—(1)Unless a specific occupational safety and health standard provides a different period of time, each employer shall assure the preservation and retention of records as follows:</p> <p>(I) <i>Employee Medical records</i> duration of employment plus thirty (30) years, except that the following types of records need not be retained for any specified period: (A) Health insurance claims records (B) First aid records (not medical histories) of one-time treatment (C) The medical records of employees who have worked for less than (1) year for the employer if they are provided to the employee upon termination</p> <p>(II) <i>Employee exposure records.</i> at least thirty (30) years, except that: (A) Background data to environmental (workplace) monitoring or measuring need only be retained for one (1) year as long as the sampling results, sampling plan, analytical and mathematical methods used, and a summary of other background data are retained for at least thirty (30) years; (B) Material safety data sheets and paragraph (c)(5)(iv) records concerning the identity of a substance or agent need not be retained for any specified period as long as some record of the identity, where and when it was used is retained for at least thirty (30) years;</p>

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	<p>(C) Biological monitoring results designated as exposure records by specific OSHA standards shall be preserved and maintained as required by the specific standard.</p> <p>(III) <i>Analyses using exposure or medical records.</i> Each analysis using exposure or medical records shall be preserved and maintained for at least thirty (30) years. Chest X-ray films shall be preserved in their original state.</p> <p>The auditor should find records generated and maintained according to the regulations indicating that the system is functioning: physician statements, first aid/injury reports, and exposure records. Because these are confidential records, the auditor may limit evaluation to the system and notification time frames, if confidentiality is an issue.</p>
3.0 Chemical Hygiene	
3.1 Generally describe the laboratory chemical hygiene plan (CHP) which should incorporate all elements of 29 CFR 1910.1450	Do the documents which support the program appear canned or originally developed by the facility to suit their specific needs? Has a facility chemical hygiene officer with appropriate background and/or experience been designated in writing?

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	<p>The auditor should look at a listing of all safety and health-related procedures and for any areas which may be missing from the overall program. The auditor should see initial and periodic data indicating representative exposures below the PEL, at least for chemicals used routinely or in bulk. The auditor should expect to see documentation such as results of breathing zone air samples, area air samples, and/or results of bloodwork analysis for exposure detection/evaluation. The MSDS file should be readily accessible to all shifts of employees at all times. An MSDSs database supplied by a chemical vendor is not acceptable unless the facility procures all chemicals from that vendor. The auditor should be able to see a clear and thoughtful paper trail from exposure evaluation through engineering controls, and finally PPE selection, if used. The auditor should direct this LOI toward documentation that shows that the facility has evaluated such materials in the workplace and acted accordingly. The auditor should inspect the training records, which should capture the requirements of 29 CFR 1910.1450.</p> <p>For facilities with analytical laboratories, the auditor should be able to evaluate documentation of a routine program for maintaining and documenting the performance of ventilation hoods. The <i>American National Standard for Ventilation</i>, ANSI/AIHA 29.5—1992, should be the laboratory's prime source. Also, hoods in which perchloric acid is used should be equipped with a wash-down system.</p>
4.0 Hazard Communication	
4.1 Generally describe the facility hazard communication program	Do the documents which support the program appear canned or originally developed by the facility to suit their specific needs?

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<p>4.2 There is evidence of effective implementation of the following mandatory program elements of 29 CFR 1910.1200:</p> <ul style="list-style-type: none"> • written hazard communication program, • hazard determination, • container labeling and other forms of warning program, • accessible MSDSs file, • hazardous material listing, and • employee training [29 CFR 1910.1200(d) thru (h)] 	<p>The auditor should inspect the available records, which should capture the requirements listed above. Secondary labeling is required for any container that is not a direct transfer.</p>
<p>5.0 Emergency Response</p>	
<p>5.1 Facility has prepared a written emergency action plan to ensure employee safety from fire and other emergencies [29 CFR 1910.38(a)(1)] including an alarm system which meets the elements required in 29 CFR 1910.165(b).</p>	<p>29 CFR 1910.38 (a)(1)—This paragraph applies to all emergency action plans required by a particular OSHA standard. The emergency action plan shall be in writing (except as provided in the last sentence of paragraph (a)(5)(iii) of this section) and shall cover those designated actions employers and employees must take to ensure employee safety from fire and other emergencies.</p> <p>The auditor should evaluate how well the plan considers the likely emergency scenarios for the facility. The auditor should ask about the alarm system. If there is one, make a determination of adequacy. The auditor should inspect training records to ensure proper training has been completed.</p>

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<p>5.2 Employer has ensured the ready availability of:</p> <ul style="list-style-type: none"> • medical personnel for advice and consultation on matters of employee health, • an emergency eye wash within the immediate work area, and • an emergency shower provided within the immediate work area [29 CFR 1910.151(a) and (c)] • portable fire extinguishers available to employees [29 CFR 1910.157(c)(1)and (e)(1)] 	<p>The auditor would expect to see evidence of the bulleted items in the facility and a general awareness by employees as to what is available to them.</p> <p>The auditor should look at several locations around the facility to ensure compliance with these requirements. The auditor should review the inspection records for portable extinguishers to ensure facility compliance with requirements.</p>
<p>5.3 Employer has developed a spill control policy, as well as provided, located, and identified spill kits so that they are readily available to all employees [29 CFR 1910.1450 Appendix A]</p>	<p>29 CFR 1910.1450 Appendix A , (D) (9) (c-d) (Non-Mandatory)—The auditor should look at several of these locations and ensure that the employees have been instructed what they should do in the event of a spill. Are the spill kits appropriate for the types of material being used in those areas?</p>
<p>5.4 With respect to external agencies identified for emergency response, the facility has:</p> <ul style="list-style-type: none"> • provided a copy of the plan, • received a commitment of agency support, and • received an assurance of capability of agency support 	<p>The auditor should review any documentation. Do external agencies such as local hospitals, volunteer fire departments, ambulance services, etc... have any idea what types of situations and contamination types they may be responding to?</p>
<p>6.0 Material Handling/Storage</p>	
<p>6.1 Generally describe the materials-handling/storage operations of the facility</p>	<p>The auditor should note use of secondary containment, PPE, buddy system, etc.</p>

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<p>6.2 Storage operations should adequately provide for:</p> <ul style="list-style-type: none"> • flammable materials ventilation • appropriate storage for bulk, drum, gas cylinder, etc. • visual inspection • grounding of flammable material containers • content specific PPE • labeling 	<p>29 CFR 1910.101-gas cylinders 29 CFR 1910.106-ventilation 29 CFR 1910.1450 Appendix A The auditor should be able to verify that these items have been taken into account on a routine basis. The facility may have a procedure to cover this.</p>
<p>7.0 Respiratory Protection</p>	
<p>7.1 Respirators are provided and/or used at the facility (If not, proceed to Item 7.0.)</p>	<p>If the response is “yes,” briefly describe the respiratory program. Do the documents which support the program appear canned or originally developed by the facility to suit their specific needs? A “no” response ends this LOI.</p>
<p>7.2 Facility has an appropriate written respiratory protection program, including:</p> <ul style="list-style-type: none"> • SOPs governing the selection and use of respirators and • annual evaluation to ensure effectiveness [29 CFR 1910.134(a) and (b)] 	<p>The auditor should evaluate program elements applicable to the standard. Evaluate the SOPs and any annual evaluation records. Always look for a flurry of activity preceding your arrival for the audit. The individual performing exposure determinations should be qualified to perform these tasks. Evaluate program elements applicable to the standard. Fit test records, employee knowledge of respiratory protection, and a knowledgeable program administrator are key to compliance. Emergency response functions potentially requiring the use of self-contained breathing apparatus (SCBA) must be assigned to off-site response organization(s) if an adequate supply of SCBAs are not available on site.</p>
<p>8.0 Facility Safety</p>	

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8.1 Generally describe the facility safety aspects which should incorporate the requirements of 29 CFR 1910.22, 36 and 37	Does the facility appear clean, orderly, and have a safety-conscious setup. The auditor should see a neat and orderly facility. If the facility is in disarray when the facility knew an audit was occurring, then they may have bigger issues such as cross contamination or unnecessary exposures to employees which deserve a thorough evaluation. The auditor should see a generally unobstructed workplace that would feasibly allow employees to exit freely during an emergency. A tape measure is not necessary to evaluate this section. The auditor would use common sense to ask "How would I get out of here in an emergency situation"? If it doesn't feel right, it probably isn't, and further investigation is warranted.
8.2 A briefing regarding site hazards is required for visitors	Check to see if a briefing is required and that the content of the briefing is adequate to inform visitors of potential site hazards.
9.0 Environmental Controls	
9.1 Noise exposure levels are below the applicable (PEL) [29 CFR 1910.95]	The auditor should find out if there are any noise monitoring data available for review.
10.0 Confined Space Program	
10.1 Generally describe the confined space status at the facility	Does the facility have any identified or potential confined spaces? If the response is "yes," briefly describe the confined space program. Do documents which support the program appear canned or originally developed by the facility to suit their specific needs? A "no" response ends this line of inquiry.
10.2 There is evidence of effective implementation of the mandatory program elements of 29 CFR 1910.146	Evaluate program elements applicable to the standard. Program documents, procedures, and annual self-assessments, and training records are the keys to this evaluation.

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Line of Inquiry and source	Expectations
11.0 Lockout/Tagout Program	
11.1 Generally describe the lockout/tagout program status at the facility	Do the documents which support the program appear canned or originally developed by the facility to suit their specific needs?
11.2 There is evidence of effective implementation of the mandatory program elements of 29 CFR 1910.147	Are the elements which support the program in place, documented and working?
12.0 Personal Protective Equipment	
12.1 Generally describe the facility PPE program	Does the program appear to be in place within the facility and does it meet any specific needs?
12.2 There is evidence of effective implementation of the following mandatory program elements of 29 CFR 1910.132 and 1450 Appendix A	The auditor should evaluate and ensure that the elements which support the program are in place, documented, and working based on his/her observations. PPE maintenance and storage should be located away from chemical use/storage areas. Does the laboratory have a policy in place which stipulates basic clothing requirements while performing work in the facility? Clothing items such as shorts, skirts, sandals, open-face shoes, and possibly all clothing made from certain material types should be prohibited in the facility environment.
13.0 First Aid/CPR and Bloodborne Pathogens	
13.1 Individuals designated by the employer as being responsible for first aid or CPR on the job are provided: <ul style="list-style-type: none"> • first aid training [29 CFR 1910.151(b-c) • CPR training • eye wash and emergency shower facilities [29 CFR 1910.1450 Appendix A and 132(a)] 	The auditor should see that sufficient numbers of employees have been trained in first aid and cardiopulmonary resuscitation (CPR). In addition, appropriate quantities of first aid supplies, eye wash stations, and emergency showers should be located within the facility.

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13.2 The laboratory is testing human biological materials or site personnel tasked with emergency response actions incorporating effective implementation of the elements of 29 CFR 1910.1030	Are the elements which support the program in place, documented, and working?
14.0 Signage	
14.1 Generally describe the facility signage	As a visitor, is it clear where you can and can't go? Is the signage consistent, outdated, or defaced?
14.2 All areas are posted as applicable per 29 CFR 1910.106, 97, 1200 and 1450 Appendix A	<p>The auditor should visually inspect the designated smoking areas to evaluate their relationship with flammable use and storage areas. Note ventilation exhausts in relation to these areas as well.</p> <p>If the facility performs testing of human or animal materials, the auditor should expect to see waste segregation practices and labeling/bagging of biological trash separately from other facility waste streams.</p> <p>The auditor should visually observe any areas where chemicals are stored for appropriate signage.</p>
15.0 Electrical Safety	
15.1 All electrical equipment is free from recognizable hazards that are likely to cause serious injury and meet the requirements of 29 CFR 1910.303	The auditor should visually observe any areas for appropriate electrical precautionary actions. Work space should be kept clear at least 3 feet in front of electrical equipment. Equipment which usually sparks or arcs during operation should have the parts which produce such hazards enclosed or separated from combustibles.